

TOWN OF DAGSBORO

33134 MAIN STREET

P O BOX 420

DAGSBORO, DELAWARE 19939

PHONE 302-732-3777 FAX 302-732-3907

TODAY'S DATE ____/____/____

NAME OF FUNERAL HOME _____

CONTACT NAME _____ PHONE # _____

DATE OF FUNERAL ____/____/____

Type of Burial: All burials shall be in a standard concrete, copper, bronze, etc. vault or liner.

Block # _____ Plot# _____

☐ Casket

☐ Cremation

○ Marble Urn (no vault required)

○ All other container types (plastic, porcelain, etc.) **must be placed in a vault before burial**

NAME OF DECEASED _____ NAME ON PLOT DEED _____

NAME OF COMPANY OPENING GRAVE _____

CONTACT NAME _____ PHONE # _____

DATE OF GRAVE OPENING ____/____/____

POLICE DEPARTMENT ASSISTANCE REQUESTED

(Call Police Department with details 302-732-3777 at least 48 hours in advance)

☐ YES

☐ NO